



**North Carolina State Laboratory of Public Health**  
*Environmental Sciences*  
**Microbiology**  
**Certificate of Analysis**

4312 District Drive  
 MSC 1918  
 Raleigh, NC 27699-1918

http://slph.ncpublichealth.com  
 Phone: 919-733-7308  
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**FINAL REPORT**

**Report to: JAMES MANHART**

**HARNETT CO ENVIRONMENTAL HEALTH**  
 307 CORNELIUS HARNETT BLVD  
 Lillington, NC 27546

**Name of System:**

**Eric Sauer**  
 1026 Delma Grimes Rd  
 Coats, NC 27521

*EH 1808-0014*

**EIN: 566000306EH**

**Delivery: NC Courier**

**Harnett County**

StarLiMS ID: **ES180829-0048**

Date Collected: 08/28/2018

Time Collected: 10:00

By: James Manhart

Date Received: 08/29/2018

Time Received: 08:32

By: Susan Beasley

Sample Source: Well water

Sampling Point: Outside spigot

Sample Type:

GPS No.

Treatment:

Well Permit No.

Comment:

**Colilert Profile**

**Method: SM 9223B**

Analyte	Test Result	Unit	Conclusion	Date Tested
Total Coliform	Absent			08/29/2018
E. coli	Absent			08/29/2018

**Report Date:** 08/30/2018

**Reported By:** Susan Beasley

**Explanations of Coliform Analysis:**

If coliform bacteria are **Absent**, the water is considered safe for drinking purpose. If coliform bacteria are **Present**, the water is considered unsafe for drinking purpose. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

North Carolina Division of Public Health  
Occupational and Environmental Epidemiology Branch, Epidemiology Section  
BIOLOGICAL ANALYSIS REPORT

Private well water information and recommendations

County: HARNETT Name: Eric Saxon Sample ID Number: E5180829-0048  
Location: 1026 Delma Gaines Rd Reviewer Susan Beasley

Initial Sample        Confirmation Sample       

BIOLOGICAL ANALYSIS RESULTS AND RECOMMENDATIONS FOR USES OF YOUR PRIVATE WELL WATER (These recommendations are based on biological analysis only.)

   No coliform bacteria were found in your well water. Your water can be used for all purposes including drinking, cooking, washing dishes, bathing and showering.

       Total coliform bacteria were detected in the sample which indicates that harmful bacteria from human or animal waste could enter the well. Do not use the water for drinking or cooking unless it has been boiled for 3 minutes. You may use your water for all other purposes including washing dishes, bathing or showering.

       Your well water needs to be re-tested to verify that the result is accurate.

       Fecal coliform bacteria were detected in the sample. Do not use the water for drinking, cooking, washing dishes, bathing or showering.

If the re-test shows contamination by bacteria contact your local health department for assistance. There may be a problem with the construction of the well, the groundwater source, or operation of the well. The well needs to be inspected by the local health department or a local well contractor to determine the problem with the well and to give guidance on how to correct the problem.

Your well water was tested for biological contaminants (total coliform and fecal coliform bacteria). The results were evaluated using the federal drinking water standards.

Drinking water may contain substances that can occur naturally in water or can be introduced into water from man-made sources. Total coliform bacteria are found in soil and fecal coliform bacteria are found in animal and human waste. Total coliform or fecal coliform bacteria in well water indicate that the well may have structural problems or that the well was not properly disinfected.

If you have been drinking the well water and are pregnant, nursing, have a child in the household under 5 years of age, or immunocompromised (such as an individual with AIDS, cancer, hepatitis, dialysis or surgical procedures) inform your physician of these results at your next visit.

If the contamination continues, you should investigate the possibility of drilling a new well or installing a point-of-entry disinfection unit which can use chlorine, ultraviolet light, or ozone.

For further information please contact your county health department or the Occupational and Environmental Epidemiology Branch at 919-707-5900.

# Harnett County Health Department Water Sample Application

Most results are received within 7 business days.

\*Some results may take 3 weeks or longer to be analyzed

ENVIRONMENTAL HEALTH SECTION  
307 W. CORNELIUS HARNETT BLVD.  
LILLINGTON, N.C. 27546  
910-893-7547

Eric Sauer 910 850 1257  
NAME AREA CODE & PHONE NUMBER  
1026 Delma Grimes Rd Coats NC 27521  
MAILING ADDRESS  
SAB  
PROPERTY ADDRESS STATE ROAD  
SUBDIVISION NAME AND LOT NUMBER

PURPOSE OF SAMPLE  Doctor Requested  Loan closing  Date of closing  
 Personal Information  Other

**Types of Samples & Cost** - Please make check payable to: Harnett County Health Department

\$50.00 - Bacteriological (coliform and fecal absent or present)  \$100.00 - Petroleum  \$100.00 - Inorganic  
 \$100.00 - Pesticides  \$100.00 - Other

Type of Well:  Drilled  Bored  Driven  
Electricity available?  Yes  No

How many outside spigots? 6 Location of spigots 6 - (2) well (4) house

Please give complete directions from the Health Department to the location,  
27 → COATS (R) on Delma Grimes

In order for a sample to be taken the well should be made visible to the inspector. This may require the removal of lids over the well, or lids and/or locks of pump houses. We also inspect your well, and if it is unapproved we will not take a sample, but advise you how to protect the well. Once the well has met state requirements, re-apply and we will sample your water at that time. If further visits are necessary there will be an additional charge of \$25.00. You will be notified by mail once the results have been received from the N. C. State Lab of Public Health, Raleigh, NC.

By signing this application I am confirming that the information given is correct.

Eric Sauer 17 Aug 18  
Signature Date

Office Use Only:  
Visible well construction:  Yes  No Approved  Unapproved  Date of initial visit: \_\_\_\_\_ Return Visit \_\_\_\_\_  
Date sample taken \_\_\_\_\_ Date re-sampled \_\_\_\_\_

8/17/18  
N